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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
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Application Number	10/579,222
Filing Date	May 12, 2006
First Named Inventor	Gunter HOELZEMANN
Art Unit	1614
Examiner Name	Unassigned
Attorney Docket Number	24945-0034.US

To: **Commissioner for Patents**
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

☒ all the attorneys/agents of record.

☐ The attorneys/agents (with registration numbers) listed on the attached paper(s), or

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NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Client/assignee requested transfer of responsibility and files back to themselves.

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1. ☐ The correspondence address is NOT affected by this withdrawal.

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Date December 5, 2006 Telephone 202-912-2142

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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